REMARKS/ARGUMENTS

In response to the Final Office Action mailed February 23, 2010 and the Advisory Action mailed May 3, 2010 Applicants amend their application and request reconsideration in view of the amendments and the following remarks. In this amendment, claim 1 is amended, no claims have been cancelled without prejudice and no claims have been added, so that claims 1-6 are currently pending. No new matter has been entered.

Claims 1-6 were rejected as being unpatentable over US Patent Publication No. 2003/0023265 to Forber (Forber) in view of US Patent Publication No. 2003/0120303 to Boyle et al. (Boyle). This rejection is respectfully traversed.

In order to make a finding of obviousness, an Examiner must (1) determine the scope and content of the prior art, including non-analogous art if it is in the field of endeavor reasonably related to the particular problem to which the claimed invention is directed, (2) ascertain the differences between the claimed invention and the prior art, considering both the prior art and claimed invention as a whole, and (3) resolve the level of ordinary skill in the art at the time of the invention, factoring in the creativity that one of ordinary skill in the art would employ as well as the Examiner's own knowledge and technical expertise.

It is respectfully submitted that the references taken as a whole fail to disclose or suggest all of the claimed limitations.

Forber discloses a vascular protection system comprising a radially expanding filtering element permeable to blood flow but impermeable to embolic material. The device comprising a membrane linked to a hollow support structure made up of a succession of wires.

Boyle discloses a self-expanding cage for use in conjunction with an embolic filtering device. The cage comprising a circumferential member adapted to move between a collapsed position and an expanded position. The device may be made from a self-expanding material cut from a single tube.

The invention of amended claim 1 claims a medical filter for therapeutic treatment of a patient, comprising: a first and second end defining a longitudinal axis; more than one pair of ribs extending between the first and second ends, the ribs tending to resiliently expand in radially outward directions from a compressed initial shape to an expanded deployed shape; wherein in the compressed initial shape, the ribs each follow a path substantially parallel to the longitudinal axis; wherein in the expanded deployed shape, the ribs each follow an undulating path, such that a first portion of each pair of ribs extends substantially adjacent to each other for a distance from the first end, and a second portion of each pair of ribs extends substantially adjacent to each other for a distance from the second end; and an intermediate portion of each one of a pair of ribs tends to curve away from each other in the expanded deployed shape; wherein in the expanded deployed shape, the filter defines a first and second filtering portion near the first and second end, respectively with a central section therebetween, the medical filter being formed from a single thin walled tube, the medical device being configured for implantation in a patient. The references, whether taken alone or in combination fail to disclose a medical filter for implantation. Neither of the references would suggest a device with all of the elements claimed and configured for implantation as both are designed for temporary use while attached to a guidewire for removal after another procedure such as angioplasty.

More specifically, the combination of references fail to disclose or even remotely suggest that separates from the delivery device and is used as a long term implant that

may be removed at a later date. Accordingly, reconsideration and withdrawal of the rejection is respectfully requested.

Applicant would be grateful for the opportunity to conduct a telephonic or in-person interview if the Examiner believes it would be helpful in disposing of the present case.

A favorable action on the merits is earnestly solicited.

Respectfully submitted,

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